

04-27-01  
EL701463729US

April 25, 2001

APPROVED  
for  
PTO DEPOSIT & CHARGE  
APR 13 2001

PTO/SB/05 (11-00)

Approved for use through 10/21/2002. OMB-0651-0032

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

UTILITY  
PATENT APPLICATION  
TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	5820.603
First Inventor	Weigel, et al.
Title	IDENTIFICATION AND USES OF A HYALURONAN RECEPTOR FOR ENDOCYTOSIS
Express Mail Label No.	EL701463729US

## APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. ☒ Fee Transmittal Form (e.g., PTO/SB/17)  
(Submit an original and a duplicate for fee processing)
2. ☒ Applicant claims small entity status.  
See 37 CFR 1.27.
3. ☒ Specification [Total Pages 206]  
(preferred arrangement set forth below)
  - Descriptive title of the invention
  - Cross Reference to Related Applications
  - Statement Regarding Fed sponsored R & D
  - Reference to sequence listing, a table, or a computer program listing appendix
  - Background of the Invention
  - Brief Summary of the Invention
  - Brief Description of the Drawings (if filed)
  - Detailed Description - Redline Specification \_\_\_\_ pgs
  - Claim(s) - Clean Specification \_\_\_\_ pgs
  - Abstract of the Disclosure
4. ☒ Drawing(s) (35 U.S.C. 113) [Total Sheets 45]
5. Oath or Declaration [Total Pages ]
  - a. ☐ Newly executed (original or copy)
  - b. ☐ Copy from a prior application (37 CFR 1.63 (d))  
(for continuation/divisional with Box 18 completed)
  - i. ☐ **DELETION OF INVENTOR(S)**  
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6. ☐ Application Data Sheet. See 37 CFR 1.76

ADDRESS TO: Assistant Commissioner for Patents  
Box Patent Application  
Washington, DC 20231

7. ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
  - a. ☒ Computer Readable Form (CRF)
  - b. Specification Sequence Listing on:
    - i. ☐ CD-ROM or CD-R (2 copies); or
    - ii. ☒ paper
  - c. ☐ Statements verifying identity of above copies

## ACCOMPANYING APPLICATION PARTS

9. ☐ Assignment Papers (cover sheet & document(s))
10. ☐ 37 CFR 3.73(b) Statement of Power of Attorney  
(when there is an assignee)
11. ☐ English Translation Document (if applicable)
12. ☐ Information Disclosure Statement (IDS)/PTO-1449 [Copies of IDS Citations]
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503)  
(Should be specifically itemized)
15. ☐ Certified Copy of Priority Document(s)  
(if foreign priority is claimed)
16. ☐ Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
17. ☒ Other: Petition to Accept Color Drawings (3 pages)

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP)

of prior application No.: \_\_\_\_\_

Prior application information.

Examiner \_\_\_\_\_

Group Art Unit \_\_\_\_\_

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

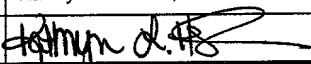
## 19. CORRESPONDENCE ADDRESS

☐ Customer Number or Bar Code Label

(Insert Customer No. or Attach bar code label here)

or ☒ Correspondence address below

Name	Dunlap, Coddling & Rogers, P.C.				
Address	9400 North Broadway, Suite 420				
City	Oklahoma City	State	OK	Zip Code	73114
Country	USA	Telephone	(405) 478-5344	Fax	(405) 478-5349

Name (Print/Type)	Kathryn L. Hester, Ph.D.	Registration No. (Attorney/Agent)	46,768
Signature			Date
			4-25-01

SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.



L701463729US

April 25, 2001

APPROVED  
PTO REPORT / JUNE 2001  
APPROVED

PTO/SB/17 (11-00)

Approved for use through 10/31/2002 - OMB 6651-0032

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

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**FEE TRANSMITTAL  
for FY 2001**

Patent fees are subject to annual revision.

**TOTAL AMOUNT OF PAYMENT**

(\$ ) 2408

**Complete if Known**

Application Number	Not Yet Assigned
Filing Date	Herewith
First Named Inventor	Weigel et al.
Examiner Name	
Group Art Unit	
Attorney Docket No.	5820.603

**METHOD OF PAYMENT**

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit  
Account  
Number

04-1700

Deposit  
Account  
Name

Dunlap, Coddling &amp; Rogers, P.C.

- ☒ Charge Any Additional Fee Required  
Under 37 CFR 1.16 and 1.17

- ☒ Applicant claims small entity status.  
See 37 CFR 1.27

2. ☐ Payment Enclosed:

☐ Check ☐ Credit card ☐ Money Order ☐ Other

**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity Small Entity

Fee Fee Fee Fee Fee Description

Code (\$) Code (\$) Code (\$)

101 710 201 355 Utility filing fee

106 320 206 160 Design filing fee

107 490 207 245 Plant filing fee

108 710 208 355 Reissue filing fee

114 150 214 75 Provisional filing fee

**Fee Paid**

355

**SUBTOTAL (1) (\$ ) 355****2. EXTRA CLAIM FEES**

		<b>Extra Claims</b>		<b>Fee from below</b>	<b>Fee Paid</b>
Total Claims	87	-20** =	67	X 9	= 603
Independent Claims	36	- 3** =	33	X 40	= 1320
Multiple Dependent					= 0

Large Entity Small Entity

Fee Fee Fee Fee Fee Description

Code (\$) Code (\$) Code (\$)

103 18 203 9 Claims in excess of 20

102 80 202 40 Independent claims in excess of 3

104 270 204 135 Multiple dependent claim, if not paid

109 80 209 40 \*\* Reissue independent claims over original patent

110 18 210 9 \*\* Reissue claims in excess of 20 and over original patent

**SUBTOTAL (2)**

(\$ ) 1923

\*\*or number previously paid, if greater; For Reissues, see above

**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
105	130	205	65			Surcharge - late filing fee or oath	
127	50	227	25			Surcharge - late provisional filing fee or cover sheet	
139	130	139	130			Non-English specification	
147	2,520	147	2,520			For filing a request for <i>ex parte</i> reexamination	
112	920*	112	920*			Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*			Requesting publication of SIR after Examiner action	
115	110	215	55			Extension for reply within first month	
116	390	216	195			Extension for reply within second month	
117	890	217	445			Extension for reply within third month	
118	1,390	218	695			Extension for reply within fourth month	
128	1,890	228	945			Extension for reply within fifth month	
119	310	219	155			Notice of Appeal	
120	310	220	155			Filing a brief in support of an appeal	
121	270	221	135			Request for oral hearing	
138	1,510	138	1,510			Petition to institute a public use proceeding	
140	110	240	55			Petition to revive - unavoidable	
141	1,240	241	620			Petition to revive - unintentional	
142	1,240	242	620			Utility issue fee (or reissue)	
143	440	243	220			Design issue fee	
144	600	244	300			Plant issue fee	130
122	130	122	130			Petitions to the Commissioner	
123	50	123	50			Processing fee under 37 CFR 1.17(q)	
126	180	126	180			Submission of Information Disclosure Stmt	
581	40	581	40			Recording each patent assignment per property (times number of properties)	
146	710	246	355			Filing a submission after final rejection (37 CFR § 1.129(a))	
149	710	249	355			For each additional invention to be examined (37 CFR § 1.129(b))	
179	710	279	355			Request for Continued Examination (RCE)	
169	900	169	900			Request for expedited examination of a design application	
Other fee (specify)							
<b>SUBTOTAL (3) (\$ ) 130</b>							

\*Reduced by Basic Filing Fee Paid

**SUBMITTED BY**

Name (Print/Type) Kathryn L. Hester, Ph.D.

Registration No.  
(Attorney/Agent)

46,738

**Complete (if applicable)**

Telephone

(405) 478-5344

Signature

Date

04/25/2001

**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.SEND TO: Box Patent Application  
Commissioner for Patents, Washington, D.C. 20231

T05440-06524360

Express Mail No. EL701463729US  
Mailed: April 25, 2001

Practitioner's Docket No. 5820.603

PATENT



**IN THE UNITED STATE PATENT AND TRADEMARK OFFICE**

In re application of:	Weigel et al.	)	
		)	
Application No.:	Not Yet Assigned	)	Group No.:
		)	
Filed:	Herewith	)	Examiner:
		)	
For:	IDENTIFICATION AND USES OF A	)	
	HYALURONAN RECEPTOR FOR	)	
	ENDOCYTOSIS	)	

COMMISSIONER FOR PATENTS  
WASHINGTON, D.C. 20231  
ATTN: DEPUTY ASSISTANT COMMISSIONER FOR PATENTS

**PETITION TO ACCEPT COLOR DRAWINGS OR PHOTOGRAPHS  
(37 CFR § 1.84(a)(2) AND (b)(2))**

1. This Petition is for the acceptance of color:

- ☒ drawings. (37 CFR § 1.84(a)(2))  
☐ photographs (37 CFR § 1.84(b)(20))

2. Attached hereto are three (3) sets of color:

- ☒ drawings.  
☐ photographs.

05/01/2001 JBALINAM 00000036 041700 09842930

01 FC:122 130.00 CH

3. The reason(s) for the need for color drawings or photographs in this application is/are as follows:

Applicant: Weigel et al.  
For: IDENTIFICATION AND USES OF A  
HYALURONAN RECEPTOR FOR ENDOCYTOSIS  
Docket No. 5820.603

Figs. 15, 17, 18, 26 and 32 are immunofluorescent slides in which the stain used to locate the HARE protein is red. When presented in black and white, it is impossible to delineate the red stain and therefore one cannot locate the HARE protein.

Figs. 28 and 35 are sequence alignments in which identical residues are highlighted in yellow, while conserved cysteine residues are shaded red. When presented in black and white, the red shading appears as a black box, and the residues in such box cannot be visualized.

4. The petition fee required to waive the requirement of § 1.84 (37 CFR § 1.17(i) - \$130.00) is paid as follows:

- ☐ Attached is a
- ☐ check
- ☐ money order

in the amount of \$\_\_\_\_\_.

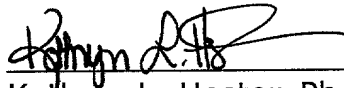
- ☒ Authorization is hereby made to charge the amount of \$130.00
- ☒ to Deposit Account No. 04-1700
- ☐ to credit card as shown on the attached credit card information authorization form PTO-2038.

Applicant: Weigel et al.  
For: IDENTIFICATION AND USES OF A  
HYALURONAN RECEPTOR FOR ENDOCYTOSIS  
Docket No. 5820.603

- ☒ Charge any additional fees required by this paper or credit any overpayment in the manner authorized above.

A duplicate of this paper is attached.

Respectfully submitted,



Kathryn L. Hester, Ph.D., Reg. No. 46,768  
DUNLAP, CODDING & ROGERS, P.C.  
9400 N. Broadway, Suite 420  
Oklahoma City, Oklahoma 73114  
(405) 478-5344

Agent for Applicant